Approved for U.S. DEPARTMENT OF COMMERCE

|   | Inder the Paperw<br>PA   | TENT APPLI                                 | *******      |   | -11111111111111111111111111111111111111 | N | RECORD                                |                      | Applica  | ipo or Docket He            | entres no             |
|---|--|--|--------------|---|---|---|---------------------------------------|----------------------|----------|-----------------------------|-----------------------|
|   |  |  | Substit      | ule for Form P                              | TO-875                                  |   | · · · · · · · · · · · · · · · · · · · |                      | 10       | 67179                       | 5                     |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)    |  |  |              |   |   |   | SHALL                                 | ΕΝΤΙΤΥ               | OR       | OTHER THAI!<br>SMALL ENTITY |                       |
| FOR NUMBER FILED NUMBER EXTRA                     |  |  |              | 1   |   | T | 7                                     | Ollive               | Citte    |                             |                       |
| 8A<br>(37   | SIC FEE<br>CFR 1.16(a))  |  |              |   | NOWBER EXTRX                            |   | RATE                                  | FEE                  | 1        | RATE                        | FE                    |
|   | TAL CLAIMS<br>CFR 1.16(c))   |  | minus 20 =   |   |   |   | X 1 =                                 | <del>  -</del>       | OR       |                             | 1                     |
|   | DEPENDENT CLAI<br>CFR 1.16(b))                                     | IMS  | minus :      | 3 : .                                       |   |   |                                       | <del> </del>         | OR       | x !=                        |                       |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) |  |  |              |   |   |   | OR                                    | X 1=                 |          |                             |                       |
| . ((  | Vie difference In  | column 1 ls less (h                        |              | ···   | 2                                       | l | +1=                                   |                      | OR       | +1                          |                       |
|   |  | LAIMS AS AM                                |              |   |   |   | TOTAL                                 | L                    | OR       | TOTAL                       | l                     |
|   |  |  | CNOCO        |   |   |   |                                       |                      |          |                             | •                     |
| <u> </u>  |  | (Column 1)<br>CLAIMS                       |              | (Column 2)<br>HIGHEST                       | (Column 3)                              | ſ | SMALL (                               | ENTITY               | OR<br>I  | OTHER                       | THAN<br>ENTITY        |
| トとこ   | Total  | REMAINING<br>AFTER<br>AMEMOMENT            |              | MUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA                        |   | RATE                                  | FEE<br>THOMAL<br>FEE |          | FLATE                       | 200.<br>TI <b>9</b> N |
| ĬΨO.  | OT CER 1.16(c)   | . 4  | Minus        | 20  | -                                       |   | X \$ =                                | 1                    | OR       | X 1 =                       | FEE                   |
| AMEN  | (37 OFR 1,14(6))   |  | Minus        | 3   | -                                       |   | X 1:=                                 |                      | OR .     | X 1 _ c                     | /-                    |
| <del>-</del>                                      | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3) CFR 1.16(0))    |  |              |   |   |   | +5                                    | /                    | OR       | +1 -                        | <b>'</b>              |
|   |  |  | ٠            |   | ·                                       |   | TOTAL .                               |                      | OR       | TOTAL<br>ADDL FEE           |                       |
| -   | <u> </u>   | (Column 1)                                 | ,            | (Column 2)                                  | (Column 3)                              |   | {                                     |                      |          | / `                         |                       |
| ENIB  |  | CLAIMS<br>RENVINNING<br>AFTER<br>ANÆNDKÆNT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                        |   | RATE                                  | ADOI-<br>TIONAL      |          | rute.                       | IDDA<br>NOIT          |
| S   | (21 Cue 1 telet)   | •  | Minus        |   | =                                       | - | x 5 =                                 | FEE                  | 0.0      |                             | FEE                   |
| AMEN  | CIT CER 1.14(01)   | -  | Micaus       |   | E                                       | - |                                       |                      | OR<br>OR | X1 =                        |                       |
| ≺   | FIRST PRESENT  | ATION OF MULTIPLE                          | DEPENDE      | M CTNM (3) CE                               | R 1.16(d))                              |   | +1 =                                  |                      | OR<br>OR | 41 =                        |                       |
|   | •  |  |              |   |   |   | TOTAL<br>ADD'L FEE                    |                      | OR       | TOTAL<br>ADD'L FEE          |                       |
| _   | <del> </del>   | (Column 1)                                 |              | (Column 2)                                  | (Column 3)                              |   | •                                     |                      | •        |                             |                       |
| 2   |  | CLAIMS<br>REIMINING<br>AFTER<br>AFCHINERT  |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                        |   | RATE                                  | ADDI-<br>TIONAL      |          | RVITE                       | DODA<br>PNOIT         |
| AMENOMEN  | Of Contraction   |  | Linus        | -   | ε                                       | - | X 1 =                                 | . FEE                |          |                             | FEC                   |
|   | fis CER 1.16(6))   | <u>.</u>                                   | Minus        | 1   | =                                       | - | X1 =                                  |                      | OR       | X 1=                        | ·                     |
| ₹   | FIRST PRESENTA   | LTION OF MULTIPLE                          | DEPENDE      | HICHM (31 CF                                | R 1.16(d))                              |   | 45 6                                  |                      | OR<br>OR | X 1=                        | •                     |
|   |  |  |              |   | ——————————————————————————————————————  | - | TOTAL<br>7501,196                     |                      | OR OR    | 10TAL                       |                       |
|   | " If the entry in co<br>" If the "Highest N<br>" If the "Highest N | furno 1 ls less frac                       | i live entry | in column 2, write                          | c "0" In columin 3                      |   | ι                                     |                      | U.:      | 391 r00A                    |                       |

This obligation of bits matter Previously Paid For Its THIS SPACE is less than 3, enter 3.

This obligation of bits matter is required by 37 CFR 1.15. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application from to the USPTO. Thre will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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